PATENT

Attorney Docket No.: BRD-0002CIP

UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Jeffrey P. Fugere

Examiner: Hwu, Davis D. Group Art Unit: 3752

Serial No.: Filing Date: 10/038,381 January 4, 2002

Title:

DISPENSE TIP WITH VENTED OUTLETS

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Post Office as First Class Mail on the date indicated below in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Sir:

2.

Transmitted herewith is an amendment for this application. 1.

RECEIVED

STATUS

APR 2 7 2004

TECHNOLOGY CENTER R3700 Applicant is

- Ø a small entity.
 - other than small entity.

EXTENSION OF TERM

- The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 3. apply.
- □ Applicant petitions for an extension of time under 37 CFR 1.136 (a)

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Serial No.: 10/038,381

Extension	Fee for other than	Fee for	
(months)	small entity	small entity	
one month	\$110.00	\$55.00	
two months	\$420.00	\$210.00	
three months	\$950.00	\$475.00	
four months	\$1,480.00	\$740.00	

Fee \$ ____

If an additional extension of time is required, please consider this a petition therefor.

□ An ex	tension for	months has already been secured and the fee paid
therefor of \$	is deducted from	om the total fee due for the total months of extension now
requested.		

Extension fee due with this request \$ _____

OR

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	CLAIM	S AS AME	NDED			
	(1)		(2)	(3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	30	minus	25	5	x \$18	\$90
INDEPENDENT CLAIMS	3	minus	. 3	0 .	x \$86	
AULTIPLE DEPENDENT CLAIM No				\$290		
				тс	TAL	\$90
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here.				SMALL ENTITY TOTAL		\$45

Applic Serial		
(c)		No additional fee for claims is required.
		OR
(d)	⊠	Total additional fee for claims required \$_45.00
		PEE DANAMENT
		<u>FEE PAYMENT</u>
5.	⊠ □	Attached is a check in the sum of \$ 45.00 Charge Deposit Account No. 50-1798 the sum of \$ A duplicate of this transmittal is attached.
		·
		Respectfully submitted,
	/	1 -10 Met 067

Boston, MA 02108

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